



**Louisiana Department of Revenue**  
**Office of Charitable Gaming**  
PO BOX 98502, Baton Rouge, LA 70884-9502  
(225) 925-1835 or (800) 562-9235 FAX (225) 925-7069

## Casino Night Session Schedule

\*\*\* Please use one form per location where games are played \*\*\*

License Number	Name of Organization		Organization Fax Number (where you want the license faxed) ( )
Name of Building Where Games are Conducted	Owner of Building (Lessor)	Building Phone # ( )	Building Fax Number ( )
Physical Address of Building (Include City & Zip Code)			Gaming Parish
<input type="checkbox"/> Check here if building is owned by organization. Amount of rent per session: \$ (Attach copy of rental or lease agreement.)			

- ❖ Revisions not completed properly may cause a delay in receiving your license.
- ❖ A \$25 check, made payable to "Office of Charitable Gaming", must accompany the second and additional revisions to your license.
- ❖ This form must be signed by an organization official and the commercial or non-commercial lessor.

Organization Official (print)	Signature X	Date	Daytime Phone # ( )
Commercial/Non-Commercial Lessor	Signature X	Date	Daytime Phone # ( )

Date of Session	Time Session Begins	AM/PM	Length of Session (6 hour max.)
		<input type="checkbox"/> AM <input type="checkbox"/> PM	
		<input type="checkbox"/> AM <input type="checkbox"/> PM	
		<input type="checkbox"/> AM <input type="checkbox"/> PM	
		<input type="checkbox"/> AM <input type="checkbox"/> PM	
		<input type="checkbox"/> AM <input type="checkbox"/> PM	
		<input type="checkbox"/> AM <input type="checkbox"/> PM	

### List of prizes (Description & Value)

1 <sup>st</sup>	6 <sup>th</sup>
2 <sup>nd</sup>	7 <sup>th</sup>
3 <sup>rd</sup>	8 <sup>th</sup>
4 <sup>th</sup>	9 <sup>th</sup>
5 <sup>th</sup>	10 <sup>th</sup>

Attach additional sheet if more than 10 prizes will be given away.

Check Number:	Receipt Number:	Date Entered:	Initials:
<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	Approved by:	